



Module 6: Transitional Benefits



Module Objectives

After this module, you should be able to:

- List who may be eligible for transitional health care coverage
- Explain the purpose of the Transitional Assistance Management Program (TAMP) and program elements
- State who can be covered under the Continued Health Care Benefit Program
- Explain the purpose of a Certificate of Creditable Coverage



TRICARE Transitional Benefits

- TRICARE assists certain active duty service members (ADSMs), Guard/Reserve members, family members and others who are losing TRICARE eligibility by offering health care coverage through the following programs:
 - Transitional Assistance Management Program
 - Transitional Care for Service-Related Conditions
 - Continued Health Care Benefit Program
- Military retirees are not eligible for the above programs, as they retain their TRICARE eligibility after retirement



Transitional Assistance Management Program

- The Transitional Assistance Management Program (TAMP) provides **180** days of transitional health care coverage for certain members of the Uniformed Services who are separating from active duty and their eligible family members
 - The 180-day period begins the day after active duty benefit coverage ends



TAMP Eligibility

- A uniformed service member is considered eligible if they are:
 - A member who is involuntarily separating from active duty under honorable conditions*
 - A member who is separating from active duty after being involuntarily retained under Stop-Loss **in support of a contingency operation**
 - A member who is separating from active duty following a voluntary agreement to stay on active duty for less than one year **in support of a contingency operation**
 - A National Guard/Reserve member separating from a period of active duty that was more than 30 consecutive days **in support of a contingency operation**

***Note:** Service members who are involuntarily separated should check with their Service personnel departments to see if they qualify for TAMP benefits and that their eligibility is documented in DEERS.



TAMP Eligibility (continued)

A uniformed service member is considered eligible if they are:

- A member who receives a sole survivorship discharge
 - Granted when a service member is the only surviving child in a family in which mother, father, or siblings died or were severely injured while on active duty
- A member who is separating from active duty and agrees to become a member of the Selected Reserve (drilling reservist)

Note: Family members of TAMP-eligible sponsors are eligible for TAMP benefits on the day after the sponsor's separation date.



TRICARE Coverage During TAMP

- TAMP offer TRICARE Standard coverage by default
 - TAMP beneficiaries (including the former active duty member) who were enrolled in TRICARE Prime immediately prior to separation may continue TRICARE Prime with no break in coverage, **as long as a re-enrollment application** is submitted prior to the end of the TAMP period
 - During TAMP, beneficiaries are not eligible for TRICARE Prime Remote or TRICARE Prime Remote for Active Duty Family Members



Continued Health Care Benefit Program (CHCBP)

- Premium-based health care program that offers temporary transitional health coverage (up to 18 or 36 months) after TRICARE eligibility ends
- Eligible beneficiaries have up to 60 days after losing military healthcare (including 180 days of TAMP) to enroll in CHCBP
 - To avoid a gap in coverage, it is recommended that beneficiaries enroll 60 days before losing TRICARE benefits
- Enrollment requires submitting an enrollment, premium payment, and all required documentation
- Note: CHCBP is not a part of TRICARE



CHCBP Eligibility

- The following are eligible to enroll in CHCBP:
 - **Former Active duty service members who are separated from active duty** (under other than adverse conditions)
 - Covered is limited to 18 months for eligible family members
 - **Unremarried former spouses**
 - Coverage is limited to 36 months if TRICARE eligible on the day **before** the date of the final decree of divorce, dissolution, or annulment
 - **Emancipated children**
 - Coverage is limited to 36 months when the child no longer meets requirements to be an eligible family member and were eligible for TRICARE on the day **before** ceasing to meet those requirements
 - **Unmarried children by adoption or legal custody**
 - *Coverage is limited to 36 months*



CHCBP Coverage

- Although CHCBP uses existing TRICARE providers and follows TRICARE Standard rules
- The CHCBP program is administered by Humana Military Healthcare Services, Inc; participation is **optional**
- Coverage is effective the day after beneficiaries lose their TRICARE benefits
- For more information, visit:
www.humana-military.com



Certificate of Creditable Coverage

- Document that provides proof of prior health care coverage
- May help reduce or eliminate medical pre-existing condition waiting periods when purchasing other health insurance coverage
- The Defense Manpower Data Center (DMDC) issues Certificates of Creditable Coverage to beneficiaries within 14 days of their loss of TRICARE eligibility
- Requests for a Certificate of Creditable Coverage can be mailed, faxed, or phoned in to the DMDC
- Uniformed services retirees do not receive a certificate of creditable coverage, because they do not lose their TRICARE eligibility



Congratulations! You've Completed Module 6: Transitional Benefits

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